

**Department of Health and Human Services  
Health Care Financing Administration  
Operational Policy Letter #79  
OPL99.079**

**Date:** February 4, 1999

**Subject:** Updating of the “Medicare Managed Care National Marketing Guide” (Supplement to the National Marketing Guide and OPL97.60 [revised])

**Issue/Question:** Corrections and Clarifications to Marketing Policy

**Resolution/Answer:** This document is an update to the National Marketing Guide. It contains corrections and clarifications of policy determined by the Marketing Product Consistency Team. This document is not intended to supersede OPL 97.060 [revised]. It is a supplement to the National Marketing Guide and OPL 97.060 [revised].

**Note:** The National Marketing Guide and follow-up revision OPLs are currently being reviewed and revised to address all 1997 BBA requirements. This is a time consuming process that will result in the National Marketing Guide and all the revision OPLs being incorporated into the “Medicare + Choice Manual” (Chapter 5). Until the manual is available, HCFA will continue to make interim up-grading changes to the National Marketing Guide through the OPL process. All OPLs are available on the Internet HCFA Managed Care Home Page.

**Contact:** HCFA Regional Office Managed Care Staff

**This OPL was prepared by the Center for Health Plans and Providers.**

## **Corrections and Clarifications to the Medicare Managed Care National Marketing Guide**

1. Page 14, add as 5th bullet:

“Be aware that plans may not use Medicare member lists for non-plan-specific purposes. If a plan has questions regarding specific material which it wishes to send to its Medicare members, the material should be submitted to HCFA for a decision.”

2. Page 14, add as 6th bullet:

“Marketing material identification systems:

Plans may use their own system for identifying marketing materials submitted to HCFA so long as the system is acceptable to the reviewing RO. The plan identifier should appear on the lower left or right side of the marketing piece. After the RO approves the marketing piece, the approval date (month/year) should always be posted to the marketing piece. The approval date is the date the plan receives the approved marketing piece back from HCFA.”

3. Page 14, add as 7th bullet:

“Review of marketing materials in non-English language:

HCFA will no longer attempt to provide translation services for review of non-English language marketing materials. For marketing with non-English materials the plan must submit the non-English version of the marketing piece, an English version (translation) of the piece, and a letter of attestation from the plan that both pieces convey the same information. Plans will be subject to verification monitoring review and associated penalties for violation of this HCFA policy. If national plans have submitted materials in English to the lead region office and these have been approved, the same materials in other languages may be used provided that plans submit attestation letters vouching that the non-English language version contains the same information as the English language version.”

4. Page 14, add as 8th bullet:

“Marketing through the Internet:

HCFA considers the Internet as simply another vehicle for the distribution of marketing information. Therefore, all regulatory rules and requirements associated with all other marketing conveyances (e.g., newspaper, radio, TV, brochures, etc.) are applicable to plan marketing activity on the Internet. HCFA marketing review authority extends to all marketing activity (both advertising and beneficiary notification activity) the plan pursues via the Internet.”

5. Page 21, Must Use/Can't Use/Can Use Chart, Testimonials-Can't Use Box. Insert the following footnote after the 2nd bullet:

“Ads must include a verbal statement by member indicating that s/he is a member of a specific plan or a “banner” at the bottom of the screen indicating the same or a voice over identifying the member as an enrollee of the specific plan.”

6. Page 25, Must Use/Can't Use/Can Use Chart, Sales Presentation-Must Use Box:

After 3rd bullet regarding TDD devices, add “MEDIA: All”. After 4th bullet regarding special needs, add “MEDIA: Flyers, direct mail, and invitations to sales meetings”.

7. Page 65, Experimental Procedures and Items. Replace the second sentence with:

“When making a determination as to whether a service is experimental, (Health Plan Name) will follow HCFA guidance (via the Medicare Carriers Manual and Coverage Issues Manual) if applicable or rely upon determinations already made by Medicare.”

8. Page 78, Emergencies. Remove parentheses around third sentence and insert the following after it:

“This includes

- emergencies that occur when the member is in Canada while traveling without unreasonable delay and by the most direct route between Alaska and another state
- emergency or non-emergency inpatient hospital services furnished in a Canadian or Mexican hospital closer to, or more accessible from, the beneficiary's U.S. residence than the nearest participating U.S. hospital which was adequately equipped to deal with and available to provide treatment of the illness or injury
- physician and ambulance services furnished in connection with, and during a period of, covered foreign hospitalization
- Christian Science services furnished under specified conditions in a Christian Science sanatorium
- services furnished on board a ship in a U.S. port, or within 6 hours of when the ship arrived at, or departed from, a U.S. port. Services not furnished in a U.S. port, or furnished more than 6 hours before arrival, or after departure from, a U.S. port are considered to have been furnished outside U.S. territorial waters, even if the ship is of U.S. registry.”

9. Page 84, Coordination of Benefits:

Based on the BBA, the coordination period for ESRD eligible beneficiaries is now 30 months instead of 18. Change 1st paragraph, 4th line from “...during a period of up to 18 months...” to “...during a period of up to 30 months...”.

10. Page 128, Use and File Definitions, 1st paragraph:

Add to the first sentence so that it reads “Eligible Material: All material used to market the health plan to non-members and all membership retention materials.”